FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P94000087612 (5)

FILED Feb 27 1998 8:00am Secretary of State

1. Corporation D.K. F	LUIDS, INC.				
Principal Place of Business Mailing Address				- 1 10011001 112 10111 0111 00111 00111 00111 00111 00111 00111 00111 00111 00111 00111 00111 00111 00111 00111	**** ***** ***** *****
2771 LA PAZ AVE. 2771 LA PAZ AVE. COOPER CITY FL 33026 COOPER CITY FL 33026				DO NOT WRITE IN THIS	2 SDACE
				3. Date Incorporated or Qualified	SAPACE
				12/02/1994	
`	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Suite Ant	# ata	Suite, Apt. #, etc.		65-0557852	Not Applicable
Suite, Apt. #, etc. St. 22		├		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Ziρ	Country	Zip	Country	8. This corporation owes or has paid the co	' '
24	25 9. Name and Address of Curre	29	30	Personal Property Tax due June 30. 10, Name and Address of New Registered	Yes No
RF	HR, RALPH S	III Negisteleo Agent	81 Name	18. Name and Address of New Negistered	Agent
104 OE 10TH CTREET			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
			oz Sireei Abdi	ess (F.O. Box Number is Not Acceptable)	
			83		
			84 City		85 Zip Code
44 Durguant	to the provining of Sections 607.05	02 and 607 1509 Florida Statu	iten the should named corn	Ft poration submits this statement for the purpose	
office or r agent. La	egistered agent, or both, in the Stat m familiar with, and accept the oblig	e of Florida. Such change was gations of, Section 607.0505, F	authorized by the corporat lorida Statutes.	ion's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE	Signature, typed or printed name of registered ag	ont and title if applicable. (NO	TE: Registered Agent alghature require	ed when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PT	DELETE	1.4 TITLE		Change Addition
NAME	remmler, dieter		1.2 NAME		
STREET ADDRESS	2771 LA PAZ AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	COOPER CITY FL 33026	DEL PER	1.4 City-St-ZIP		
TITLE	s Oberhofer, Kurt	☐ DELETE	2.1 TITLE		Change Addition
NAME	2771 LA PAZ AVE.		2.2 NAME		1
STREET ADDRESS	COOPER CITY FL 33026		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	COO! EN OIT TE GGE	☐ DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME		- section	3.2 NAME		C country C vention
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		!
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME	•	ĺ
STREET ADDRESS			4.3 STREET ADDRESS		j
CITY-ST-ZIP		····	4.4 Crty-St-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>	TT RECES	5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		}
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	certify that the information supplied	with this filing does not qualify f	6.4 CITY-ST-ZiP	Section 119.07(3)(i). Florida Statutes, Liurther of	ertify that the information

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the reports a mustos empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address.

SIGNATURE:

02.22.98

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